

# Privacy and Security Solutions for Interoperable Health Information Exchange

*Report to NCVHS ad hoc committee on secondary health data*

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July 17, 2007

# Overview and Background

- Brief summary of the contract
- Where we are today
- Where we are going

# Assumptions Underlying the Methodology

- Decisions about protecting the privacy and security of health information should be made at the local community level
- Discussions need to take place to develop an understanding of the current landscape and the variation that exists between organizations within each state, and ultimately across states
- Stakeholders at the state and community levels, including patients and consumers, must be involved in identifying the challenges and developing solutions to achieve broad-based acceptance

# Overview of the Process

- Community-based research model where states “own” the issues and outcomes
- Engage broad range of stakeholders to identify challenges and develop solutions
- State project teams follow a “core” methodology that frames discussions in terms of purposes for the exchange of certain types of health information within 9 domains of privacy and security

# Nine Domains of Privacy and Security

- User and entity authentication
- Authorization and access controls
- Patient and provider identification
- Information transmission security and exchange protocols
- Protection against improper modification
- Information audits
- Administrative or physical security
- State law restrictions
- Information use and disclosure policies

# 18 Exchange Scenarios

- Treatment
- Payment
- RHIO
- Research
- Law Enforcement
- Prescription Drug Use/Benefit
- Healthcare Operations/Marketing
- Bioterrorism
- Public Health
- Employee Health State Government Oversight

# Scenarios Focused on Secondary Data

- RHIO scenario: Request to participating entities to provide identifiable data to monitor incidence and management of diabetic patients
- State Discussion:
  - De-identified data okay to submit to HIE
  - Identifiable data would require IRB approval
  - Uncertain about HIE status under the HIPAA Privacy Rule

# Scenarios Focused on Secondary Data (continued)

- Research Data Use and State Government Oversight Scenarios
  - no issues with the use of data for research purposes or oversight if protocols are reviewed by appropriate IRBs and informed consent is obtained from patients if identifiable data are used.



# Scenarios Focused on Secondary Data (continued)

## ■ Law Enforcement

- Stakeholders unclear on the law related to disclosure of health information to law enforcement
- Hospitals typically require subpoena but there is variation-some release on verbal request
- Agreement that organizations would not release info to parents because patient over 18 even though on parents insurance
- Discussion noted that EOB would likely inform parents

# Scenarios Focused on Secondary Data (continued)

## ■ Health Care Operations/Marketing

- 8 states generated a lot of discussion of ethics of using health data for marketing purposes
- De-identified data for quality improvement was okay
- Identifiable data would always require authorization
- 3 states teams said that they would never sell data for 3<sup>rd</sup> party marketing

# For more information

- <http://healthit.ahrq.gov>
- <http://healthit.ahrq.gov/privacyandsecurity>
- [www.rti.org/hispc](http://www.rti.org/hispc)
  
- [steven.posnack@hhs.gov](mailto:steven.posnack@hhs.gov)
- [jonathan.white@ahrq.hhs.gov](mailto:jonathan.white@ahrq.hhs.gov)
- [lld@rti.org](mailto:lld@rti.org)